
Stroke or Suspected Stroke-Special Study Protocol

This protocol is only applicable to agencies who have agreed and been approved to be a part of the MindRhythm Special Study and providers who have completed the necessary training.

1. Follow General Pre-hospital Care Protocol.
2. Utilize the Cincinnati Pre-hospital Stroke Scale (CPSS). Try to elicit the following signs:
 - a. Facial droop (have patient show teeth or smile)
 - b. Arm drift (have patient close eyes and hold both arms straight out for 10 seconds)
 - c. Abnormal speech (have patient say “the sky is blue in Michigan”) Any deficit in the CPSS is considered positive for stroke.
3. If the patient is demonstrating signs of hypoglycemia, measure blood glucose level.
 - a. If less than 60 mg/dL, administer oral glucose.
 - b. Treat per Altered Mental Status Protocol.
4. If seizure, follow Seizures Protocol.
5. Document time last seen normal for patient, if known.
6. Minimize scene time, notify destination hospital as soon as possible and begin transport.
7. Initiate vascular access. (DO NOT delay scene time for IV.)
8. Monitor ECG. (DO NOT delay scene time for ECG monitoring.)
9. Follow the process of having the patient agree to being a participant in the special study
10. Place the MindRhythm headband on the patient.
11. If the patient cannot tolerate the headband or it does not fit:
 - a. Do not use
 - b. End study
 - c. Continue transport without delay
12. Place the MinRhythm electrodes on the patient.
13. Turn on the I-phone and answer the questions.
14. When care is transferred to hospital staff:
 - a. Notify the hospital staff that the patient is part of a special study.
 - b. Inform staff they can place the headband and phone in a bag and a coordinator will pick-up the equipment.